02-60456-57

MN DY Safety and Additional Information

2 1 *********************

SAFETY / ENVIRONMENTAL REQUIREMENTS:

ISSUE DATE 01/06/11

Date Completed: ____

Completed By : ____

Accepted By : ____

Page 1 Of 2

W=Whse

Emp No

Signature :

Signature : ____

** Record Time Daily **

Date

Failure Code: _____

** Delay Codes Legend **
C=CrSp T=Tag TL=Tool

Hours

P≕Plan

Code/Hrs

Delays

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	9

CREW: 192

Planner

Ref No

1

Originator : WILLIAM MORGAN

Drawing No : 2SGB-M2064A

Project ID : 2SGB-FAN-2A

Equip No/Cat: 2SGB--0 3

Shutdown : U Unit

Step Job Scope

: JIMMIE KNAPP

WORK ORDER TYPE: MODIFICATIONS

PRE-OUTAGE AND OUTAGE WORK FOR OVERFIRE

AIR SYSTEM. WORK ON CCS SYSTEM TO INSTALL

Schedule Date :

Tag Reguest :

: 3A : NO

Last Reading : No Reading

: NOT SCHEDULED

Priority

Clearance

Frequency

Text ID

CREW: 192 WORK ORDER TYPE: MODIFICATIONS 02-60456-57 ISSUE DATE 01/06/11 Page 2 Of 2

**	Work	Order	Parts	List	**
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Part No Description		PO/Req/SIR	Date Due	U/M	Reqd	Commit	Issued/Rcvd	
1	51575	TERMINAL, RING TONGUE	S 275276*	03/04/04	EA	500	0	500